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FROM: Marcia L. Campbell-Jones
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DATE: May 16, 2002

RE: 09/822,952

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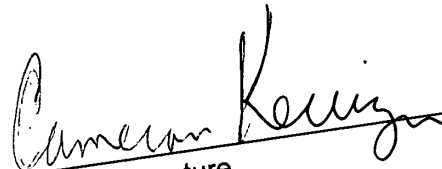
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**REQUEST TO RESCIND PREVIOUS
NONPUBLICATION REQUEST
35 U.S.C. 122(b)(2)(B)(ii)**

Application Number	09/822,952
Filing Date	03/30/2001
First Named Inventor	Charles David Claude
Title	Controlled Morphologies In Polymer Drug For Release Of Drugs From Polymer Films
Atty Docket Number	50623.169
Group Art Unit	1616
Examiner	Dewitty, R.

I hereby **rescind** the previous request that the above-identified application not be published under 35 U.S.C. 122(b).

May 1, 2002
Date


Signature

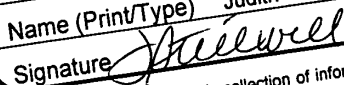
Cameron K. Kerrigan
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This request must be signed in compliance with 37 CFR 1.33(b).

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Name (Print/Type)	Judith Stillwell	Date	May 1, 2002
Signature			

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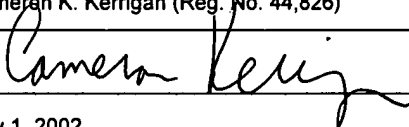
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/822,952	
	Filing Date	March 30, 2001	
	First Named Inventor	Charles David Claude	
	Group Art Unit	1616	
	Examiner Name	DeWitty, R.	
Total Number of Pages in This Submission	2	Attorney Docket Number	50623.169

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Transmittal Letter (In Duplicate) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response (10 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Certificate of Mailing <input type="checkbox"/> Express Mail Label No. <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request to Rescind Previous Non-Publication Request
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Cameron K. Kerrigan (Reg. No. 44,826)
Signature	
Date	May 1, 2002

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